

CYNTHIA A. HARDING, M.P.H. Interim Director

JEFFREY D. GUNZENHAUSER, M.D., M.P.H. Interim Health Officer

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May 19, 2015

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:



BOARD OF SUPERVISORS

Hilda L. Solis First District

Mark Ridley-Thomas Second District

Sheila Kuehl Third District

Don Knabe

Michael D. Antonovich Fifth District

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

33 OF MAY 19, 2015

PATRICK OZAWA ACTING EXECUTIVE OFFICER

APPROVAL OF AMENDMENTS TO FIVE CONTRACTS TO EXTEND THE CONTRACT TERM AND ONE CONTRACT TO DELEGATE DUTIES AND ASSIGN CONTRACT RIGHTS; AND APPROVAL OF ONE SOLE SOURCE CONTRACT FOR THE PROVISION OF BLACK INFANT HEALTH PROGRAM SERVICES FOR THE PERIOD JULY 1, 2015 THROUGH JUNE 30, 2017 (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Request approval to execute amendments to five contracts to extend the term and one contract to delegate duties and assign contract rights; and approval of one sole source contract with the City of Pasadena for the provision of Black Infant Health Program services.

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Authorize and instruct the Interim Director of the Department of Public Health (DPH), or her designee, to execute amendments, substantially similar to Exhibit I, which extend the term of contracts with the five Black Infant Health (BIH) service providers identified in Attachment A, for the period of July 1, 2015 through June 30, 2016, for a total maximum obligation of \$1,875,000, as detailed in Attachment A, 100 percent offset by Los Angeles County Children and Families First-Proposition 10 Commission (First 5 LA) and California Department of Public Health (CDPH) funding.
- 2. Authorize and instruct the Interim Director of DPH, or her designee, to execute an amendment, substantially similar to Exhibit II, to BIH Service Contract Number H-700340, to assign and delegate all contract rights and responsibilities from Partners in Care Foundation (PICF) to Antelope Valley Partners in Health (AVPH), effective July 1, 2015.

- 3. Delegate authority to the Interim Director of DPH, or her designee, to execute a non-competitively bid (sole source) contract with the City of Pasadena (COP), for the provision of BIH Program services, effective upon execution through June 30, 2016, at a total maximum obligation of \$208,919, 100 percent offset by CDPH funds, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).
- 4. Delegate authority to the Interim Director of DPH, or her designee, to execute amendments to the contracts referenced above that extend the term for six months plus six month-to-month extensions through June 30, 2017, and/or provide an increase or decrease in funding up to 10 percent above or below each term's annual base maximum obligation, effective upon amendment execution or at the beginning of the applicable contract term, and make corresponding service adjustments, as necessary, subject to review and approval by County Counsel, and notification to your Board and the CEO.
- 5. Delegate authority to the Interim Director of DPH, or her designee, to execute change notices to the BIH contracts that authorize modifications to or within budget categories, and corresponding service adjustments, as necessary; changes to hours of operation and/or service locations; and/or corrections of errors in the contract's terms and conditions.

PURPOSE /JUSTIFICATION OF RECOMMENDED ACTION

Approval of Recommendation 1 will allow DPH to execute amendments to extend the term of five contracts for the provision of BIH services, effective July 1, 2015 through June 30, 2016. Services to be provided include, but are not limited to: providing health education information about issues impacting mothers and infants; coordinating with providers to ensure timely access to health care services; conducting social support and empowerment classes; and collaborating with other entities to strategize to reduce African-American infant mortality. Through the five community-based agencies, BIH services are provided to six Service Planning Areas (SPAs): SPA 1 (Antelope Valley), SPA 2 (San Fernando Valley), SPA 3 (San Gabriel Valley), SPA 4 (Metro Area), and SPAs 6 and 8 (South Los Angeles). Based on data analysis of perinatal health indicators, such as low birth weight and infant mortality, SPAs 5 and 7 are not geographic areas of need.

This recommendation to extend the term of the current contracts will allow the continued provision of BIH services while DPH issues a Request for Proposals (RFP) for services that reflect the new State BIH service model. DPH had previously informed your Board of its intent to release an RFP in the summer of 2014. However, due to delays with the State Request for Supplemental Information as well as implementation delays and modifications to the State's BIH model of service, DPH was unable to move forward with the RFP. DPH continues to work with CDPH to implement the new State BIH model of service - which focuses less on case management and instead emphasizes participation in prenatal and postpartum group sessions for women who are pregnant or parenting a child up to one year, and anticipates releasing an RFP during fiscal year (FY) 2015-16.

Approval of Recommendation 2 will allow DPH to execute an amendment to delegate the duties and assign the rights of BIH Contract Number H-700340 from PICF to AVPH, effective July 1, 2015. PICH notified DPH that it will no longer continue to provide BIH services under this contract. DPH, in collaboration with PICF, identified AVPH as the agency in the Antelope Valley

The Honorable Board of Supervisors May 19, 2015 Page 3

best suited to ensure BIH services continue in SPA 1. AVPH has agreed to accept all contractual rights and responsibilities and will employ current PICF staff which will help ensure continuity in the provision of BIH services.

Approval of Recommendation 3 will allow DPH to execute a sole source contract with COP to provide BIH services based on the new State model in SPA 3. COP has been providing state-funded BIH services for over 26 years and recently implemented the State's new service model that includes facilitating workshops to provide health education and culturally sensitive empowerment classes to pregnant and parenting women. COP is uniquely positioned to reach the intended target audience as the only entity in the County implementing the new programmatic model reaching African American women in the Pasadena area.

On October 28, 2014, CDPH notified all local health jurisdictions that the distribution of BIH funding for the state-wide program would be recalculated to reflect the latest data regarding African American births. As a result, CDPH determined that COP was no longer eligible to directly receive State BIH funds. To ensure that BIH services continue in the City of Pasadena, CDPH asked DPH to consider contracting with COP for the provision of these services.

Approval of Recommendation 4 will allow DPH to execute amendments to the contracts to extend the term of the contracts and/or increase or decrease funding up to 10 percent above or below the annual base maximum obligation, effective upon amendment execution or at the beginning of the applicable contract term, and make corresponding service adjustments, as necessary. This recommendation enables DPH to amend contracts to allow for the provision of additional units of funded services that are above the service level identified in the current contract and/or the inclusion of unreimbursed eligible costs based on the availability of grant funds and grant funder approval. While the County is under no obligation to pay a contractor beyond what is identified in the original executed contract, the County may determine that the Contractor has provided evidence of eligible costs for qualifying contracted services and that it is in the County's best interest to increase the maximum contract obligation as a result of receipt of additional grant funds or a determination that funds should be reallocated. This recommendation has no impact on net County cost.

Approval of Recommendation 5 will allow DPH to execute change notices to the contracts that authorize modifications to or within budget categories, and corresponding service adjustments, as necessary; changes to hours of operation and/or service locations; and/or corrections of errors in the contract's terms and conditions.

Implementation of Strategic Plan Goals

The recommended actions support Goal 3, Integrated Services Delivery, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The total cost for the BIH amendments for FY 2015-16 is \$1,875,000 (consisting of approximately \$1,083,521 from First 5 LA and approximately \$791,479 from CDPH's Federal Title V, Federal Title XIX, and State General Funds).

The total cost for the sole source contract for FY 2015-16 is \$208,919; 100 percent offset by CDPH's Federal Title V, Federal Title XIX, and State General Funds.

The Honorable Board of Supervisors May 19, 2015 Page 4

Funding is included in DPH's Recommended Budget for FY 2015-16 and will be included in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The BIH program targets pregnant women and new mothers and their families. It strives to empower and connect mothers to important social support programs that help them develop healthy and supportive relationships with their children and partners and it also educates communities so that health outcomes can improve for African-American infants.

The state-wide BIH program began in 1989 to address the alarming number of black infant deaths. Even now, black infants have twice the mortality rate of their white counterparts, according to recent data from the U.S. Department of Health and Human Services Office of Minority Health.

County Counsel has approved Exhibits I and II as to form. Attachment A is the Contract Agency List and Attachment B is the Sole Source Checklist approved by the CEO.

CONTRACTING PROCESS

The current BIH contracts have been in place since 2004. In 2010, CDPH implemented a new BIH service model throughout the State, with the exception of Los Angeles County. Los Angeles County was exempt from participation in the initial implementation of the new model until positive client outcomes could be demonstrated in the other counties that were piloting the program.

During FY 2015-16, DPH intends to release an RFP that reflects the new model.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will allow DPH to continue to provide BIH services to improve the health of African-American pregnant and parenting women and reduce African-American infant mortality by assuring access to BIH services throughout Los Angeles County.

Respectfully submitted,

David Dijkstra

Administrative Deputy

CAH: eav BL#03196

Enclosures (4)

c: Interim Chief Executive Officer
County Counsel
Acting Executive Officer, Board of Supervisors

DEPARTMENT OF PUBLIC HEALTH

MATERNAL, CHILD, AND ADOLESCENT HEALTH PROGRAMS

BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY

CONTRACT AGENCY LIST

Contract Number	Contractor/Contact Information	Service Planning Area Served	Supervisorial District Served	Estimated State Funding FY 2015-16 Allocation	Estimated First 5 LA FY 2015-16 Allocation	Total Maximum Obligation
H700539	The Children's Collective, Inc. 5870-C West Jefferson Blvd. Los Angeles, California 90016 (310) 733-4388 Fax (310) 733-4320 Jackie Kimbrough, Ph.D., Executive Director	6,8	2,4	\$198,594	\$291,344	\$489,938
H700540	Great Beginnings for Black Babies, Inc. 301 North Prairie Avenue, Suite 515 Inglewood, California 90301 (310) 677-7995 Fax (310) 677-1041 Rae Jones, Executive Director	4,6,8	1,2,3	\$203,285	\$304,927	\$508,212
H700341	Mission City Community Network, Inc. 15206 Parthenia Street North Hills, California 91343 (818) 895-3100 Fax (818) 895-9464 Nik Gupta, CEO/Chief Financial Officer	2	3,5	\$108,280	\$186,470	\$294,750
H700339	Prototypes, Centers for Innovation in Health, Mental Health and Social Services 1000 N. Alameda Street, Ste. 390 Los Angeles, California 90012 (213) 542-3838 Fax (213) 225-0085 Cassandra Loch, Executive, Director	3	1,4,5	\$99,242	\$178,958	\$278,200
H700340	**Antelope Valley Partners for Health 45104 10 TH St. West Lancaster, California 93534 (661)945-0650 Fax (661)945-0750 Michelle Keifer, Executive Director	1	5	\$107,885	\$196,015	\$303,900
	Project Total			*\$717,286	\$1,157,714	\$1,875,000

^{*} State allocation consists of CDPH federal Title V and Title XIX funds.

^{**} Contract to be delegated and assigned from Partners in Care Foundation

City of Pasadena

Check (√)	JUSTIFICATION FOR SOLE SOURCE PROCUREMENT OF SERVICES Identify applicable justification and provide documentation for each checked item		
	Only one bona fide source for the service exists; performance and price competition are not available.		
	Quick action is required (emergency situation)		
	> Proposals have been solicited but no satisfactory proposals were received.		
	Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.		
,	Maintenance service agreements exist on equipment which must be serviced by the authorized manufacturer's service representatives.		
	It is most cost-effective to obtain services by exercising an option under an existing contract.		
√	 ➢ It is the best interest of the County (e.g., administrative cost savings, too long a learning curve for a new service provider, etc.). On October 28, 2014, the California Department of Public Health (CDPH) notified all Local Health Jurisdictions that the distribution of Black Infant Health (BIH) funding for the statewide program would be recalculated to reflect the latest data regarding African American births. As a result, the City of Pasadena (COP) was no longer eligible to directly receive BIH funding from the CDPH. CDPH approached Los Angeles County (County) to determine if the Department of Public Health (DPH) would be willing to include COP as a subcontractor to provide services in Pasadena and the surrounding areas in SPA 3. 		
	COP has been providing state-funded BIH services for over 26 years and recently implemented the State's new service model that includes facilitating workshops to provide health education and culturally sensitive empowerment classes to pregnant and parenting women. To ensure that BIH services continue in the COP, CDPH requested DPH to consider contracting with COP for the provision of BIH services. COP is uniquely positioned to reach the intended target audience as the only entity in the County implementing the new programmatic model reaching African American women in the Pasadena area. As one of the first implementers of the state's new model, COP would be able to assist the County to overcome barriers in rolling out the BIH program, and maintain the same high-level of programmatic expertise and fiscal efficiency. Description of the state of the stat		
	Manager, CEO HIZLIS Date		

Contract No.	•

BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTYAGREEMENT

	Ame	endment No		
	THIS AMENDMENT is made and entered into this			
day of		, 2015,		
	by and between	COUNTY OF LOS ANGELES "County"),	(hereafter	
	and	"Contractor").	(hereafter	
	WHEREAS, reference is made to	that certain document entitled "BL	ACK INFANT	
HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY AGREEMENT", dated,				
20XX, and further identified as Agreement No, and any Amendments thereto (all				

WHEREAS, it is the intent of the parties hereto to amend Agreement to extend the term and increase the maximum obligation of County and make other hereafter designated changes; and

WHEREAS, said Agreement provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties.

NOW, THEREFORE, the parties hereto agree as follows:

- 1. This Amendment shall be effective July 1, 2015.
- 2. Paragraph 1, TERM, first subparagraph, shall be revised to read as follows:
 - "1. TERM: The term of this Agreement shall be effective June 15, 2004 and shall

hereafter "Agreement"); and

continue in full force and effect through June 30, 2016, unless sooner canceled or terminated as provided herein."

·				
3. Paragraph 2, <u>DESCRIPTION OF SERVICES</u> , shall be revised to read as follows:				
"2. DESCRIPTION OF SERVICES: Contractor shall provide the services described in				
Exhibit A, Exhibit B, and Exhibit C, Scopes of Work, attached hereto and				
incorporated herein by reference."				
4. Paragraph 3, MAXIMUM OBLIGATION OF COUNTY, subparagraph, shall be				
added to read as follows:				
" During the period effective July 1, 2015 through June 30, 2016, the maximum				
obligation of County for all services provided hereunder shall not exceed				
(\$). Such maximum obligation is comprised of				
(\$) in California Department of Public Health funds and				
(\$) in Los Angeles County Children and Family First-				
Proposition 10 Commission (First 5 LA) funds. This sum represents the total maximum				
obligation of County as shown in Schedule, attached hereto and incorporated herein				
by reference."				
5. Effective on the date of this Amendment, Exhibit, Scope of Work, shall be attached				
hereto and incorporated herein by reference.				
6. Effective on the date of this Amendment, Schedule shall be attached hereto and				
corporated herein by reference.				
7. Except for the changes set forth herein above, Agreement shall not be changed in				
any respect by this Amendment.				
- 2 -				

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Interim Director of Public Health, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES			
Ву			
Cynthia A. Harding, M.P.H. Interim Director			
Contractor			
Ву			
Signature			
Printed Name			
Title			
(AFFIX CORPORATE SEAL)			

APPROVED AS TO FORM BY THE OFFICE OF THE COUNTY COUNSEL MARK J. SALADINO

APPROVED AS TO CONTRACT ADMINISTRATION:
Department of Public Health

Ву	
, •	Patricia Gibson, Chief
	Contracts and Grants Division

BL#03196:eav

SCHEDULE

CONTRACTOR NAME BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY

	Budget Period
	July 1, 2015
	through
	June 30, 2016
Full-Time Salaries Employee Benefits @ 30%	\$
Embioles penetics @ 30%	ት
Total Full-Time Salaries and Employee Benefits	\$
Part-Time Salaries	\$ -0-
Employee Benefits @ 14.32%	\$
Total Part-Time Salaries and Employee Benefits	\$ -0-
Total Salaries and Employee Benefits	\$
Operating Expenses	\$
Equipment	\$
Rent	\$
Subcontractor	\$
Indirect Cost @ 10% of Salaries	\$
TOTAL PROGRAM BUDGET	* \$

*Maximum Obligation is comprised of State Title V, First 5 LA and federal Title XIX Matching Funds.

During the term of this Agreement, any variation to the above budget must have prior written approval of the Department of Public Health Director or his designee. Funds shall only be utilized for eligible program expenses.

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM JULY 1, 2015 through JUNE 30, 2016 SCOPE OF WORK

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified.

Goals:

- Reduce African American infant mortality through comprehensive community-based efforts by assuring that at-risk pregnant and parenting women and their children up to one year of age have access to quality maternal and child health services.
 - Increase the number of African American women who receive prenatal care in the first trimester.
 - Reduce the number of African American infants who weigh less than 2,500 grams at birth. 2,6,4,7,6
- Reduce the number of African American women who smoke, use alcohol, and/or non-prescription drugs during pregnancy. Reduce the number of African American babies who die due to Sudden Infant Death Syndrome (SIDS). Reduce African American maternal mortality.

METHOD(S) OF EVALUATION	1.1a Maintain on file: current job descriptions; recruitment ads/bulletins/flyers; employment applications and supporting documents.			
TIMELINE	07/01/15 - 06/30/16	Hire by 08/01/15		Hire by 08/15/15
IMPLEMENTATION ACTIVITIES	1.1a Maintain culturally competent staff to perform program services.The staff required to perform BIH services:	Program Manager – Coordinate and oversee the implementation of the State BIH Prenatal Care Outreach (PCO) and Social Support & Empowerment (SSE) models, and the Data Collection System (BIH-MIS). Serve as the	program liaison to DPH. Minimum Requirement – A Bachelors degree from an accredited college or university in health care or public administration, or a closely related field and three (3) years of highly responsible staff experience including the supervision of 5 or more employees.	Community Health Outreach Workers – Provide care coordination services as outlined in the PCO curriculum, and assist with SSE. Minimum Requirement – High School diploma or GED and six (6) months experience working with the public or interacting with community groups providing information.
MEASURABLE OBJECTIVES		competent and better health care services for at-risk African American women (18 years of age and older) who are pregnant or parenting a child up to 18 months of age.		

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Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM JULY 1, 2015 through JUNE 30, 2016 SCOPE OF WORK

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified.

MEASURABLE OBJECTIVES

METHOD(S) OF EVALUATION Hire by 08/15/15 08/15/15 Hire by Health Educator – Facilitate the SSE curriculum and coordinate SSE effort with care Minimum Requirement - A Bachelors degree from an accredited college or university in Health Education, Ethnic Minimum Requirement - High School Data Clerk/Administrative Assistant - Perform BIH-MIS data entry and clerical support. experience performing general office recent experience conducting group answering phones, and maintaining amounts of data, and two (2) years presentations and working with at-Studies, Social Work, or a closely related field or Three (3) years of diploma or GED and one (1) year risk or high risk African American duties including word processing, experience inputting significant iling systems. coordination services. women.

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

rable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation to be completed according to the timeline and are to be documented as specified. ### TIMELINE METHOD(S) OF EVALUATION ### TIMELINE METHOD(S) OF EVALUATION	2.1a Maintain training certificates in employee and subcontractors' files.	2.1b Maintain training certificates in employee and subcontractors' files.	2.1c Maintain current State-DPH training outline on file. Maintain training certificates in employee and subcontractors' files.	2.1d Maintain a copy of quarterly time study forms on file.	
eved by following are to be documer	As	As scheduled	07/01/15-	08/06/15 11/05/15 02/07/16 05/06/16	
g measurable objectives. The objectives shall be achivities are to be completed according to the timeline and IMPLEMENTATION ACTIVITIES	2.1a Staff and subcontractors will attend the State MCH FFP Program (Time Study) training.	2.1b Staff and subcontractors will attend DPH Time Study Training, which includes training on the Automated Time Study software.	2.1c To train staff and subcontractors that do not attend the State or DPH trainings, the Contractor will use the State-DPH Time Study training outline to train staff and subcontractors within the first two (2) weeks of their employment.	2.1d Staff and subcontractors will complete quarterly time study forms for July and October 2013, and January and April 2014. Submit original forms to DPH no later than the 5 th working day of the month following the month the time study was conducted.	
The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, the activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES		Maternal and Child Health (MCH) Federal Financial Participation (FFP) Program, and on the DPH Automated Time Study procedures.			

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, the activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified.	j measurable objectives. The objectives shall be achiev vities are to be completed according to the timeline and a	ved by following thate to be documente	urable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation e to be completed according to the timeline and are to be documented as specified.
MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
2.2 By June 30, 2016, the Contractor will ensure all BIH staff and subcontractors implementing program activities, and trained on the State-mandated BIH	2.2a Staff and subcontractors will attend the State BIH PCO, SSE, and Data System (BIH-MIS) trainings.	As	2.2a Maintain training certificates in employee and subcontractors' files.
ial ant	2.2b Review and update the PCO, SSE, and BIH-MIS training outline. Submit training outline to DPH for approval.	07/15/15	2.2b Maintain training outline and DPH approval on file.
	2.2c To train staff and subcontractors that do not attend the State BIH trainings, use the DPH-approved PCO, SSE, and BIH-MIS training outline. The Contractor will conduct and complete training for staff and subcontractors within the first sixty (60) days of their employment	07/15/15 – 06/30/16	2.2c Maintain training certificates in employee and subcontractors' files.
	2.2d Provide staff and subcontractors training on perinatal health issues and other topics that will improve their knowledge and ability to perform program services competently. Training topics include, but are not limited to, those identified in the State PCO	07/01/15- 06/30/16	2.2d Maintain training documentation in employee and subcontractors' files.

	1 Number
Contractor:	Contract No

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

ented as specified. METHOD(S) OF EVALUATION	2.3a Maintain training certificates in employee and subcontractors' files.	2.3b Maintain current DPH training manual on file. Maintain training certificates in employee and subcontractors' files.	2.3c Maintain training certificates in employee and subcontractors' files.	2.3d Maintain training certificates in employee and subcontractors' files.	2.3e Maintain BSC forms in client files. At the annual program review, client files will be reviewed.
re to be docume TIMELINE	As scheduled	07/01/15 -	As scheduled	06/30/16	06/30/16
activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METHOMES.	2.3a Staff and subcontractors will attend the DPH scheduled <i>Techniques to Document Well Baby Visits and Immunizations</i> training.	2.3b To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will use the DPH <i>Techniques to Document Well Baby Visits and Immunizations</i> manual to train staff and subcontractors within the first sixty (60) days of their employment.	2.3c Staff and subcontractors will attend the DPH scheduled <i>Sleep Patterns and Schedules</i> training.	2.3d To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will contact The Storks Stops Here and arrange training for staff and subcontractors within the first sixty (60) days of their employment.	2.3e Document sleep patterns and schedules discussions on the Baby Sleep Conditioning (BSC) forms. Forms must include staff/subcontractor signature and the date(s) the topic was discussed with the client.
activities and methods of evaluation. Implementation ad MEASURABLE OBJECTIVES	2.3 By June 30, 2016, the Contractor will ensure all BiH staff and subcontractors implementing program activities are trained on the DPH <i>Techniques</i> to Document Well Baby Visits &	Immunizations, Infant Sleep Patterns & Schedules, and Mother & Infant Oral Care.			

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

If the work plan, that is comprised of implementation anted as specified. METHOD(S) OF EVALUATION	2.3f Maintain training certificates in employee and subcontractors' files.	2.3g Maintain training certificates in employee and subcontractors' files.	2.3h At the annual program review client files will be reviewed.		
ved by following re to be docume TIMELINE	As scheduled	07/01/15 - 06/30/16	07/01/15 - 06/30/16		
The Contractor must work toward achieving the following measurable objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METHOD(S) OF EVALUATION	2.3f Staff and subcontractors will attend the DPH scheduled Mother and Infant Oral Care training.	 2.3g To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will contact National Health Foundation and arrange training for staff and subcontractors within the first sixty (60) days of their employment. 	2.3h Document dental referrals and final referral results in the greenbook on the 4 th blank line of the Client Referral Tracking form, page 5.		
The Contractor must work toward achieving the followir activities and methods of evaluation. Implementation activities and methods of evaluation. Implementation activities and methods of evaluation activities.					

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

Sumented as specified. VE METHOD(S) OF EVALUATION	 3.1a Maintain community education contacts protocol and DPH approval on file. 5 - 3.1b Maintain an up-to-date resource directory/library and referral forms on file. 	5 - 3.1c Maintain materials and DPH approval(s) on file.	5 - 3.1d Maintain itineraries on file. 6	
TIMELINE	07/15/15 07/01/15 - 06/30/16	06/30/16 06/30/16	07/01/15 - 06/30/16	
activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES INTELINE METHOMETHEMENTATION ACTIVITIES.	 3.1a Review and update the community education contacts protocol. Submit protocol to DPH for approval. 3.1b Update the resource directory/library and referral form(s) for staff and subcontractors to use. 	3.1c Develop or use existing culturally appropriate flyers/literature to disseminate during community education activities. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health and First 5 LA." Materials should also have the State BIH logo imprinted on them. Submit created and existing materials to DPH for approval 30 days prior to intended use.	3.1d Schedule staff to conduct community education contacts in the target area. Staff and subcontractor itineraries must have a date, time, site name, zip code where the community education contact was made, and include a staff or subcontractor signature.	,
activities and methods of evaluation. Implementation a MEASURABLE OBJECTIVES	3.1 By June 30, 2016, the Contractor will increase awareness about African American infant mortality and BIH Program services by conducting culturally competent street-based community education in the target area and document 1,754 (minimum) community contacts.			

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation METHOD(S) OF EVALUATION activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified TIMELINE IMPLEMENTATION ACTIVITIES MEASURABLE OBJECTIVES

Client Screening Instrument forms completed for women not enrolled in PCO; activity/event contains completed Outreach Contact forms; activity/events conducted and the number of monthly reports, document the number of (organized by fiscal year and month) that 3.1e Maintain an Outreach Activities Binder summary sheets and sign-in sheets. community education contacts. 07/01/15 -06/30/16 document activities. To validate (count) the use. The Contractor can only make a copy If contact was made at an event, also have develop an Outreach Contact form for field site name, zip code, and include the name orm must have at a minimum: a person's and summary sheet. Submit activity/event potential client, also complete a CSI form. report. The Contractor may use a copy of of the CSI form because changes cannot be made to the State CSI form. ast name, first initial or name, residence zip code, phone number, date of contact, summary sheet to DPH with the monthly the contact. If contact was made with a Conduct community education contacts a completed activity/event sign-in sheet contact, a completed Outreach Contact the Outreach Contact form found in the data forms book (greenbook), or can of the staff or subcontractor making following the PCO curriculum and 3.1e

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

METHOD(S) OF EVALUATION	4.1a Maintain care coordination protocol and DPH approval on file,	4.1b Maintain Outreach Contact forms in the Outreach Activities Binder and file the copy of the CSI in the clients' files. Maintain the client's greenbook data in the BIH-MIS.	4.1c Maintain client files confidentially in locked cabinets and ensure client files and BIH-MIS data is made available upon request by State BIH personnel and/or authorized DPH BIH staff. At the annual program review client files will be reviewed.
TIMELINE	08/01/15	06/30/16	06/30/16
MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METH	4.1a Review and update the care coordination protocol. Submit protocol to DPH for approval.	 4.1b Enroll women in PCO who meet program eligibility requirements (see total score and service decision on the CSI form). Submit a fiscal year-to-date BIH-MIS Caseload Report to DPH with the monthly report. A) CHOWs transfer the data on the Outreach Contact form onto the Outreach Contact form found in the greenbook, fill in any missing data, and file the original in the Outreach Activities Binder. B) The Data Clerk enters the new client data into the BIH-MIS and obtains a BIH-MIS case number. 	arranged in the same order and contain all administrative forms sited in the PCO curriculum. All files must have up-to-date documentation of interactions with the client (inclusive of all forms and progress notes), and up-to-date greenbook data. Also, maintain a list of incentives distributed to the clients, and a list of health education topics discussed with the client and signed-off by a staff/subcontractor signature and date. The Contractor must use file folders that can maintain the file's contents securely.
MEASURABLE OBJECTIVES	4.1 By June 30, 2016, the Contractor will provide care coordination services to 516 (minimum) women enrolled in PCO.		

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

g the work plan, that is comprised of implementation ented as specified. METHOD(S) OF EVALUATION	4.2a Maintain training documentation in employee and subcontractors' files.	4.2b Maintain on file (organized by fiscal year and month) case conference sign-in sheets and minutes. Document follow-up services in the client files.	4.2c Maintain in the client's file applicable progress notes, and record immunization data in the greenbook.
eved by following are to be docum TIMELINE	07/01/15 -	06/30/16	07/01/15 -
ng measurable objectives. The objectives shall be achieved by following the work plan, the tivities are to be completed according to the timeline and are to be documented as specified. IMPLEMENTATION ACTIVITIES TIMELINE	4.2a Train staff and subcontractors to conduct one-on-one health education about topics that will be discussed with a client throughout participation in BIH.	4.2b Staff and subcontractors will conduct follow-up services to ensure clients have access to perinatal, post-partum, well baby care, immunizations, and other services deemed essential and appropriate for the health and welfare of the clients (mother, index child, and other family members). Follow-up services include, but are not limited to: completing assessment forms, inclusive of the Prenatal Supplemental Form; developing a care plan; making home visits; making referrals; conducting one-on-one health education; writing progress notes; completing client data forms; distributing incentives; participating in case conferences; coordinating other client-centered activities.	4.2c Following the current immunizations schedule, CHOWs will document the immunizations the index child(ren) has received. If immunizations are not up-to-date, CHOWs will encourage and assist clients to obtain the needed immunizations.
The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METHOD(S) OF EVALUATION	4.2 By June 30, 2016, the Contractor will ensure all BIH staff and subcontractors implementing program services, provide		

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

g the work plan, that is comprised of implementation ented as specified. METHOD(S) OF EVALUATION	5.1a Maintain SSE care coordination protocol and DPH approval on file.	5.1b Maintain on file a SSE class roster for each SSE class series, and sign-in sheets for each SSE class session. Maintain the SSE-client's greenbook data in the BIH-MIS.	5.1c Maintain client files (permanent and/or temporary) in locked cabinets and ensure all SSE-client files and SSE BIH-MIS data is made available upon request by State BIH personnel and/or authorized DPH BIH staff. At the annual program review SSE-client files will be reviewed.
ved by following are to be docum TIMELINE	08/01/15	07/01/15-	06/30/16
The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METHOD(S) OF EVALUATION	5.1a Review and update the SSE care coordination protocol. Submit protocol to DPH for approval.	 5.1b Enroll PCO clients who are at moderate risk (based on a mid-range service decision score) in SSE. A) Using the client's completed SSE forms, the SSE Facilitator transfers the data to the SSE pages of the client's greenbook. B) Using the SSE-client's greenbook data, the Data Clerk enters the SSE data into the BIH-MIS. 	coordination file to maintain SSE information. SSE-client papers must be arranged in the same order and contain all administrative forms sited in the SSE curriculum. SSE files must have up-to-date documentation of interactions with the SSE client (inclusive of all forms and progress notes), and up-to-date greenbook data. Also in the SSE section of the client's file, maintain a list of SSE incentives distributed to the clients. The Contractor must use file folders that can maintain the SSE papers securely. A) For ease in accessing SSE client information, the SSE Facilitator may elect to maintain SSE client data in a temporary separate client file while a SSE class series is in session, as long as the client is enrolled in the class
The Contractor must work toward achieving the follow activities and methods of evaluation. Implementation are MEASURABLE OBJECTIVES	5.1 By June 30, 2016, the Contractor will conduct SSE classes and graduate 122 (minimum) clients.		

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BLACK INFANT HEALTH (BIH) PROGRAM JULY 1, 2015 through JUNE 30, 2016 SCOPE OF WORK

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified.

5.2a Maintain on file (organized by fiscal year and month) case conference sign-in sheets and minutes. Document SSE follow-up services in the SSE section of the client's greenbook METHOD(S) OF EVALUATION and file. TIMELINE 07/01/15 -06/30/16 empowered through positive group support conducting SSE classes; collaborating with the client's CHOW to update the care plan; SSE forms must be placed in the care series. Upon graduating, or when the current class series, all of the client's up services include, but are not limited to: client is no longer participating in the to make healthy lifestyle choices. Follow-The SSE Facilitator will conduct follow-up writing SSE progress notes; completing SSE client data forms; distributing IMPLEMENTATION ACTIVITIES making a home visit; making referrals; health education forums; coordinating conferences; conducting other group SSE services to ensure clients are incentives; participating in case other client-centered activities. coordination file. 5.2a ensure the SSE-client receives follow-up 5.2 By June 30, 2016, the Contractor will MEASURABLE OBJECTIVES services.

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

activities and methods of evaluation. Implementation ac	activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METHODIAL	TIMELINE	nted as specified. METHOD(S) OF EVALUATION
6.1 By June 30, 2016, the Contractor will enter client data into the BIH-MIS.	6.1a The Contractor will install all necessary computer equipment.	07/15/15	6.1a At the BIH Program site, the Contractor has computer equipment that meets the State BIH-MIS specifications.
	6.1b The Contractor will install the State BIH-MIS software.	07/15/15	6.1b The software is installed.
	6.1c Review and update the data collection-data entry protocol. Submit protocol to DPH for approval.	08/01/15	6.1c Maintain data collection-data entry protocol and DPH approval on file.
	6.1d Input, update, and maintain client data in the State BIH-MIS.	07/01/15-	6.1d Client data is successfully uploaded electronically each month to the SDSU Evaluation Team. At the annual program review a client's MIS data will be compared to the data found in the client's file.
	6.1e As specified by DPH, no later than the 15 th of each month submit BIH-MIS data reports along with the monthly report and invoice.	08/15/15 – 06/30/16	6.1e The DPH Contractor's Monthly Report and Invoice Log.

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

The Contractor may work as already the solution and section and the state of the contractor will see that the state of the contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity and solicit and support for program activities. The Contractor will denity activities and programs. The Contractor will denity activities and programs. The develops article for the contractor will denity activities and programs. The Contractor will denity activities altered where the community activities and denity activities activit
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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation and an achieved by following the work plan, that is comprised of implementation and include and an achieved as a property of available of ava

	MEASONABLE OBJECTIVES	8.1b Conduct First Trimester Enrollment 07/01/15- 8.1b Maintain 07/01/16- 06/30/16 07/01/16- 0	07/01/15- 06/30/16	8.1b Maintain activity/event sign-in sheets and
ı		summary sheets and activity/event sign-in sheet(s). Submit activity/event summary sheet(s) to DPH with the monthly report.		Binder.
		8.1c As a result of the campaign, enroll women in PCO who meet program eligibility requirements.	08/01/15 -	8.1c See Method(s) of Evaluation 4.1b
9.1	By June 30, 2016, the Contractor will conduct one (1) <i>Celebrate Healthy Babies</i> (CHB) event to celebrate BIH clients' successes and to mobilize the community around the issue of African American infant mortality.	9.1a In collaboration with the Community Advisory Board, the Contractor will plan and publicize the Celebrate Healthy Babies event. Submit the CHB plan and publicity (PSA; flyers; print articles; etc.) to DPH for approval at least 90 days prior to a needed approval for the event.	07/01/15 - 06/30/16	9.1a Maintain Community Advisory Board meeting notices, agendas, and minutes that document planning efforts. Maintain the Celebrate Healthy Babies plan, publicity, and DPH approval on file.
10.1	By June 30, 2016, the Contractor will educate pregnant clients on the causes of low birth weight.	10.1a Develop or use existing educational materials to educate pregnant clients about the signs, symptoms, and causes (premature birth; drugs, alcohol, and tobacco use) of low birth weight. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health and First 5 LA."	07/01/15 -	10.1a Maintain materials and DPH approval(s) on file.

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

according to the timeline and are to be documented as specified. TION ACTIVITIES TIMELINE METHOD(S) OF EVALUATION	10.1b Maintain list of health education topics in client files.	11.1a Maintain training documentation in employee and subcontractors' files.	11.1b Maintain materials and DPH approval(s) on file.	11.1c Maintain Memorandums of Understanding on file.
are to be docume	07/01/15 - 06/30/16	07/01/15 - 06/30/16	06/30/16	07/01/15 -
tivities are to be completed according to the timeline and a IMPLEMENTATION ACTIVITIES	log and First 5 LA logo imprinted on them. Submit created and existing educational materials to DPH for approval 30 days prior to intended use. 10.1b On the list of health education topics, include the causes of low birth weight subjects and document the dates and staff or subcontractor who discussed causes of low birth weight with the client and who distributed educational materials to the client.	11.1a Provide staff and subcontractors training to identify clients who use alcohol, illicit substances, and or tobacco products.	11.1b Develop or use existing perinatal-related alcohol, illicit drugs, and tobacco products educational materials to distribute to clients. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health, and First 5 LA." Materials should also have the State BIH logo imprinted on them. Submit created and existing materials to DPH for approval 30 days prior to intended use.	11.1c Identify treatment programs and develop Memorandums of Understanding (MOU).
activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METH-		11.1 By June 30, 2016, the Contractor will refer BIH clients who use illicit substances, alcohol, and/or tobacco products to appropriate treatment		

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

MEASURABLE OBJECTIVES IMPLEMENTATION ACTIVITIES TIMELINE METH	11.1d Staff and subcontractors will make appropriate referrals for clients in need of treatment services. Document referrals and final referral results in the greenbook on the Client Referral Tracking pages.	11.1e Monitor the client's efforts to eliminate or reduce the risky behavior, and provide positive reinforcement to encourage and support the client. Supply the client with appropriate health education material and make applicable progress note entries.	Conjunction with the California SIDS Program, will educate clients and their about SIDS deaths in the	The strategies that may prevent SIDS. The strategies that may prevent SIDS. The strategies that may prevent SIDS. Clients at the following times: 8 th month of pregnancy; within two (2) weeks after the baby's birth; at the mother-infant 6-month follow-up home visit.	12.1c Within two (2) weeks after the baby's birth, staff or subcontractor will make a home visit to observe the newborn's sleeping position and sleeping area and provide the mother with appropriate feedback to reinforce the SIDS message.
ACTIVITIES TIMELINE			SIDS Education 07/15/15 mit the SIDS form r approval.	OS education with most of 08/01/15 — 06/30/16 () weeks after the er-infant 6-month	er the baby's 08/01/15 – tor will make a 06/30/16 e newborn's seping area and appropriate s SIDS message.
INE METHOD(S) OF EVALUATION	06/30/16 - 11.1d At the annual program review client files will be reviewed.	07/01/15 - 11.1e At the annual program review client files will 06/30/16 be reviewed.	5/15 12.1a Maintain the SIDS Education form, educational materials, and DPH approval on file.	12.1b Maintain an up-to-date SIDS Education 3/16 form in the client's file.	15 12.1c Maintain documentation of the observations 3/16 and feedback on the SIDS Education form.

Contractor:	Contract Number:

BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

g the work plan, that is comprised of implementation ented as specified. METHOD(S) OF EVALUATION	13.1a Maintain QIP and DPH approval on file. Maintain QI Committee documentation, written policies and procedures, Mid-Year, and Annual QI Summary Reports on file and make available at the annual program review.	
wed by following are to be docum TIMELINE	07/01/15	06/15/16
The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES MPLEMENTATION ACTIVITIES TIMELINE METHOD(S) OF EVALUATION		A) Wild-Year Cl Summary Hebort – Document areas of concern identified by the Ql Committee; program performance indicators; results of process and outcome measures; data collected from client feedback; plans of corrective action. B) Annual Ql Summary Report – Document outcomes of implementing plans of correction action; overall Ql process performance.
The Contractor must work toward achieving the following activities and methods of evaluation. Implementation activities and mEASURABLE OBJECTIVES	13.1 By June 30, 2016, the Contractor will implement a Quality Improvement Plan (QIP) process for continually assessing the program's effectiveness in accomplishing the BIH mission, goals, and objectives.	

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BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2015 through JUNE 30, 2016

the work plan, that is comprised of implementation anted as specified. METHOD(S) OF EVALUATION	14.1a Meeting sign-in sheets.	14.1b Meeting sign-in sheets.	
ved by following tre to be docume	08/01/15 -	As scheduled	
The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities are to be completed according to the timeline and are to be documented as specified. MEASURABLE OBJECTIVES METHOD(S) OF EVALUATION	14.1a Attend the monthly DPH BIH Team Meeting, and host one (1) of these meetings. Required attendees at the DPH BIH Team Meetings: Program Manager, SSE Facilitator, (1) CHOW.	14.1b Participate in other State BIH and/or DPH BIH meetings and activities.	
The Contractor must work toward achieving the followir activities and methods of evaluation. Implementation ac INEASURABLE OBJECTIVES	14.1 Throughout the term of this agreement, maintain effective communication and program coordination with DPH to maximize program efforts and to ensure continuity in the countywide BIH	Program.	

DELEGATION OF DUTIES AND ASSIGNMENTS OF RIGHTS OF AGREEMENT BLACK INFANT HEALTH SERVICES

Amendment No. 13

THIS AMENDMENT is made and en	tered into this day of
 , 2015	
by and between	COUNTY OF LOS ANGELES (hereafter "County"),
and	PARTNERS IN CARE FOUNDATION (hereafter "Assignor").
and	ANTELOPE VALLEY PARTNERS FOR HEALTH (hereafter "Assignee")

WHEREAS, on April 3, 2007, reference is made to that certain document entitled "BLACK INFANT HEALTH PROGRAM SERVICES AGREEMENT," dated June 15, 2004 and further identified as Contract Number H-700340, and any amendments thereto (all hereafter referred to as "Agreement"); and

WHEREAS, Paragraph 21, PROHIBITION AGAINST ASSIGNMENT AND DELEGATION, of Agreement prohibits Assignor from delegating its duties or assigning its rights hereunder without the prior written consent of County; and

WHEREAS, it is the desire of the parties hereto to delegate the duties and assign the rights under Agreement, from Assignor to Assignee; and

NOW, THEREFORE, the parties hereto agree as follows:

1. All rights and responsibilities under Agreement have been assigned and

delegated by Assignor to Assignee, effective July 1, 2015.

2. County hereby consents to such assignment and delegation.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Delegation of Duties and Assignments of Rights of Agreement to be subscribed by its Interim Director of Public Health, and Assignor and Assignee have caused the same to be subscribed in its respective behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

•	By
	Interim Director
	PARTNERS IN CARE FOUNDATION Assignor
	By
	Signature
	Printed Name
	Title(AFFIX CORPORATE SEAL)
	ANTELOPE VALLEY PARTNERS FOR HEALTH Assignee
	BySignature
	Print Name
	Title(AFFIX CORPORATE SEAL)
APPROVED AS TO FORM BY THE OFFICE OF THE COUNTY COUNSEL MARK J. SALADINO	
APPROVED AS TO CONTRACT ADMINISTRATION: Department of Public Health	
By	
BL#03196:eav	